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Bib Data Sheet

CONFIRMATION NO. 7897

SERIAL NUMBER 10/804,089	FILING OR 371(c) DATE 03/19/2004 RULE	CLASS 433	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. 66489-036-8
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APPLICANTS

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** CONTINUING DATA *****

None JSW

** FOREIGN APPLICATIONS *****

GERMANY 103 12 848.4 03/21/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

06/01/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 9	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

ADDRESS

25269

TITLE

Data base, tooth model and restorative item constructed from digitized images of real teeth

FILING FEE RECEIVED 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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